

INVOICE

**AMI Expeditionary Healthcare LLC**

12030 Sunrise Valley Drive
Suite 240
Reston, Virginia 20191

Phone: 5.1.2e

BILL TO Ministry of Health, Welfare and Sport

Department of Health and Youth Caribbean Netherlands
PO Box 205350
The Hague, 2500 EJ

INVOICE #	DATE	DUE DATE	TERMS	REFERENCE
INV-062020C	06/30/2020	07/07/2020	Net 7	Curacao Contract signed 4 April 2020; For the month ending June 2020

ITEM NAME	DESCRIPTION	QTY	UNIT PRICE	LINE TOTAL
PROJECT MANAGER	PROJECT MANAGER FOR ON LOCATION DHHS SURGE EFFORT		5.1.2b	
LOGISTICIAN	LOGISTICIAN			
CCU /ICU MEDICAL DOCTOR	CCU /ICU MEDICAL DOCTOR			
ICU REGISTERED NURSE	ICU REGISTERED NURSE			
NURSE PRACTITIONER/PA	NURSE PRACTITIONER/PHYSICIAN ASSISTANT			
REGISTERED NURSE	REGISTERED NURSE			
RESPIRATORY THERAPIST	RESPIRATORY THERAPIST			
PERSONAL PROTECTIVE EQUIPMENT	ALL INCLUSIVE CATEGORY OF PERSONAL PROTECTIVE EQUIPMENT (MASKS, GLOVES, BODY PROTECTION, TYVEK, ETC.)			
			SUBTOTAL	
			TOTAL	5.1.2b

ELECTRONIC PAYMENT INSTRUCTIONS:

PNC BANK N.A.
249 FIFTH AVE.
PITTSBURGH, PA 15222

FOR AMI EXPEDITIONARY HEALTHCARE LLC

ACCOUNT: 5.1.1c

ABA ROUTING: 5.1.1c

SWIFT: 5.1.1c

THANK YOU FOR YOUR BUSINESS